

their homework will know what those are and we will get into them as we go along. I think this should be comprehensive and give every Member the opportunity to have their say.

□ 1230

Mr. Speaker, this truly is a red letter day, not just for the Congress but for the American people, because today, after 10 years of debate and compromise, we are finally having the opportunity to put forth patient protection legislation that will really change the way our health care system operates for the better.

A true patients' bill of rights must make our health care system more accessible. Health care insurance is no good if someone cannot get it. So accessibility of health care and health care insurance is critical. Obviously, it has to be affordable, more affordable. Affordable is an area we have focused on. And most importantly, more accountable, accountable to the Americans that health care serves.

This fair rule and the underlying legislation represents a reasoned, commonsense approach that allows people that disagree with health care providers an opportunity for just and impartial appeal. This is what Americans have been asking for.

I have worked on health care legislation with so many colleagues ever since coming to Congress, and I can tell my colleagues that this is something that matters a lot back in my district and every other place I go in the country when I talk about it. When I am back in my district, not one town hall meeting goes by without constituents registering concerns about their health care and questioning how things will be fixed, how much it will cost, can I afford it, will I be able to get it, and so forth.

It has always been a very delicate balance to come up with something that will be supported by the House, of course our colleagues in the other body, and the administration; and I commend the hard work of so many, but especially the diligent efforts now on a timely basis of people like the gentleman from Georgia (Mr. NORWOOD) and President Bush, who understood compromise is still better for the American people than nothing at all. Laws are better than unresolved issues.

Frankly, one of the reasons we can be here today is because of the respect our colleague, the gentleman from Georgia, has in this body. In the words of Senate Majority Leader TOM DASCHLE, and I quote him, "If Dr. NORWOOD, who I think knows the issue better than anyone else does, feels that some of these proposals are acceptable, I would certainly entertain them." Well, we are entertaining them today in an amendment that every Member has had a chance to read, and we will have 60 minutes set aside for debate on that.

What is important is that when our constituents ask, will I have access to affordable health care, we can say

forthrightly, look them right in the eye, and say yes. When they ask, can I sue my HMO if there is cause, the answer will again be yes.

With these positive reforms comes great responsibility, of course; and I commend my colleagues for entertaining the compromise that will not overburden the courts with frivolous lawsuits but will still allow justice under the law. We must be sure that the courts are the last resort and not the first. This bill provides for an independent review process that is immediately responsive to patients' needs.

My constituents in southwest Florida are tired of standing in lines, as I suspect Americans are elsewhere. The lines at the doctor's office is bad enough, to say nothing of waiting times. They certainly should not be waiting in additional queues at the courthouse. Instead of driving people to court, a true patients' protection plan will enable Americans to get the care they need and ensure the accountability of medical providers. And I think that is what this legislation does.

Certainly the rule is designed to bring out the debate on these points. Mr. Speaker, I urge my colleagues to continue the careful manner in which this legislation was drafted, and I urge them to support this rule.

Mr. Speaker, I reserve the balance of my time.

Ms. SLAUGHTER. Mr. Speaker, I thank the gentleman from Florida for yielding me the customary 30 minutes, and I yield myself such time as I may consume.

(Ms. SLAUGHTER asked and was given permission to revise and extend her remarks.)

Ms. SLAUGHTER. Mr. Speaker, I rise in strong opposition to this rule. I am opposed to the process the rule represents and the political cynicism it embodies.

Make no mistake, this rule is designed to kill the bipartisan patients' bill of rights. This is death by a thousand cuts. By slicing away at the bipartisan-based bill, the leadership today once again will bury one of the most important pieces of legislation to face this body in a generation, all in an effort to appease the insurance companies and the HMOs.

Mr. Speaker, there is no new agreement regarding the bipartisan patients' bill of rights. Yesterday's hastily arranged news conference by the administration was pure theater. Only one sponsor of the bipartisan patients' bill of rights, the gentleman from Georgia (Mr. NORWOOD), was included in the discussion with the administration. And even the gentleman from Georgia admitted to the Committee on Rules last night that he did not have a deal. And, indeed, until he saw what was written in the Committee on Rules, he would not have one. And at that moment last night he had no idea what would be written.

And now with ink barely dry, the Republican leadership is demanding a

vote. We wonder how many Members will see this so-called agreement before they have to vote.

A dangerous pattern is developing in the Committee on Rules. Knowing that they do not have the support to kill important measures, like campaign finance reform or a balanced energy program that maintains the environment, the leadership cloaks itself in the darkness of night. When daylight breaks, they emerge with procedural hurdles designed to obfuscate, confuse, and ultimately bury these measures that may mean life and death for many of our constituents.

The leadership knows the Senate will not agree to this version of the patients' bill of rights, and they know by passing the administration's version they can force a conference with the Senate, thereby relegating the patients' bill of rights to the legislative graveyard.

The rule today makes in order only those amendments designed to kill the measure. There are poison pills. Each one weakens and dilutes patients' protections. The amendments block legal remedies in State courts under State laws, they hand over to HMOs the right to choose which court to adjudicate in, and they stack the deck against anyone who tries to enforce the patient protections we have worked for so long to secure.

Moreover, the new Norwood bill fails to pay for any of the revenue losses it causes. In case Members are unaware, the surplus we worked so hard to secure the past 8 years is gone. In fact, the Treasury has had to borrow \$51 billion just to pay for the tax rebate mailed just last week. Now, for the second time in 24 hours, we have blocked amendments by Democrats who want to be responsible and pay for the cost of the legislation we are considering.

The House is now preparing to blow an additional \$25 billion hole in the deficit. Democrats did offer responsible offsets but were voted down unanimously in the Committee on Rules.

Where will this money come from? The only place left after the massive tax cuts enacted by Congress are the Medicare and Social Security Trust Funds.

I want to remind my colleagues this is about real people, about real lives, and as I stated earlier, a matter of life and death for many. H.R. 2563 would make a difference for the man who goes to the emergency room suffering a heart attack and the woman who has to wait to get permission to see her OB-GYN for a gynecological problem and the parent whose child is being shunted from doctor to doctor by an insurer. It would help patients obtain speedy reviews when potentially life-saving treatment is denied or when a financially crippling bill will not be covered by the insurer.

The bipartisan bill would make a difference in the day-to-day lives of the people we represent. And for this body to treat this measure so cavalierly defies conscience and defies belief.